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DMH**

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
500 S. VERMONT AVE., LOS ANGELES, CA 90020 HTTP://DMH.LACOUNTY.GOV



ROBIN KAY, PH.D.
Acting Director

DENNIS MURATA, M.S.W.
Acting Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director

ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

June 14, 2016

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June 14, 2016

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

LORI GLASGOW
EXECUTIVE OFFICER

Dear Supervisors:

**REQUEST APPROVAL TO EXTEND CONSULTANT SERVICES AGREEMENT WITH UNIVERSITY
OF
CALIFORNIA, SAN DIEGO - FISCAL YEAR 2016-17
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)**

SUBJECT

Approval to extend the Consultant Services Agreement with the University of California, San Diego to provide data collection and evaluation of client level outcomes for Mental Health Services Act Community Services & Supports Integrated Care programs through Fiscal Year 2016-17.

IT IS RECOMMENDED THAT THE BOARD:

1. Approve and authorize the Acting Director of Mental Health (Director), or her designee, to prepare, sign, and execute an amendment, substantially similar to Attachment, to extend the Consultant Services Agreement with the University of California, San Diego (UCSD) to provide data collection and evaluation of client level outcomes for Mental Health Services Act (MHSA) Community Services & Supports (CSS) Integrated Care programs from July 1, 2016 through June 30, 2017.
2. Delegate authority to the Director, or her designee, to prepare, sign, and execute future amendments to the UCSD Consultant Services Agreement and establish as a new Total Contract Amount (TCA), the aggregate of the original Agreement, and all amendments, provided that: 1) the County's total payments to the contractor under the Agreement in any fiscal year will not exceed an increase of 10 percent from the applicable Board-approved TCA; 2) any such increase will be used to provide additional services or to reflect program and/or Board policy changes; 3) your Board has appropriated sufficient funds for all changes;

4) approval from County Counsel, or designee, is obtained prior to such amendment; 5) County and Contractor may, by written amendment, mutually agree to reduce programs, services, or extend the term of the Agreement; and 6) the Director notifies your Board and the Chief Executive Officer of Agreement changes in writing within 30 days after execution of each amendment.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

The collection and reporting of client level outcomes is central to MHSA CSS Integrated Care programs. Extending the UCSD Consultant Services Agreement ensures the continued collection and reporting of client level outcomes for 17 CSS Integrated Care programs throughout Fiscal Year (FY) 2016-17 while the Department of Mental Health (DMH) actively works towards completing system modification on its internal outcome web-based application.

Implementation of Strategic Plan Goals

The recommended actions support the County's Strategic Plan Goal 1, Operational Effectiveness/Fiscal Sustainability, and Goal 3, Integrated Service Delivery.

FISCAL IMPACT/FINANCING

The total cost of the UCSD Consultant Services Agreement extension for FY 2016-17 is \$39,000, and is fully funded by State MHSA revenue. Funding for this Agreement is included in DMH's CEO Recommended Budget.

There is no net County cost impact associated with this action.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The UCSD Consultant Services Agreement was developed to evaluate a three-year integrated care MHSA Innovations project involving 17 provider partnerships. This Agreement was approved by your Board on July 17, 2012 and expires on June 30, 2016. The collection and reporting of client level outcomes is central to these integrated care programs. DMH anticipates assuming responsibility for ongoing outcome data collection and reporting for these programs on July 1, 2017, after completion of data system modifications.

The Amendment format has been approved as to form by County Counsel. DMH administrative staff will review and monitor the contractor's adherence to the Agreement and ensure that the Agreement's provisions and Departmental policies are being followed.

CONTRACTING PROCESS

On November 9, 2011, DMH issued the MHSA-Evaluation of the Innovation Models Request for Services No. 5 to identify a qualified contractor to perform evaluation services. DMH announced the release of the RFS by mailing letters along with a compact disc to agencies on

the Department's MHSA Master Agreement List who submitted a Statement of Qualification for the INN service category box. Agencies were required to attend a Mandatory Proposers' Conference and there were a total of three proposals received. One of the three proposers was successful and received a contract award. After notification of the RFS results, the unsuccessful proposers were given the opportunity to request a formal debriefing. Two agencies submitted a request. Following the requested debriefing, the agencies were further presented an opportunity to pursue a Proposer Contractor Selection Review. However, the Department did not receive a response from the agencies by the required timeframe.

The Evaluation Committee was comprised of three evaluators and a facilitator. The Evaluation Committee used the RFS No. 5 specific standardized evaluation tool and an informed average process to arrive at final scores. Following the evaluation process, the Department's Executive Management Team reviewed the Evaluation Committee's finalized evaluation ratings and approved to recommend to your Board an award to the highest scoring proposer. Award of the Consultant Services Agreement with UCSD was approved by your Board on July 17, 2012, with an expiration date of December 31, 2014.

Due to later than anticipated service initiation and the complexity of creating community partnerships, additional time is needed for evaluation of the models to demonstrate their effectiveness in providing effective integrated mental health, primary care, and substance abuse services to clients with serious mental illness and one or more co-occurring disorders. Board approval of the recommended actions will allow UCSD to continue designing, implementing, and administering the mandatory evaluation components for FY 2016-17 while DMH completes system modifications on its internal outcome web-based application.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of this amendment will allow for the continued evaluation of 17 integrated care models to assess their effectiveness in improving mental and physical health while DMH modifies its internal data collection system to accept integrated care metrics. The results of the evaluation and the learning from these models will continue to be used to inform current and future integrated service delivery and will help the Department achieve the triple aim of improving the client experience of care, improving the health of clients, and reducing the cost of integrated care.

The Honorable Board of Supervisors

6/14/2016

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Respectfully submitted,

Robin Kay, Ph.D.

ROBIN KAY, Ph.D.

Acting Director of Mental Health

RK:DM:DIG:DKH

Enclosures

c: Executive Officer, Board of Supervisors
Chief Executive Officer
County Counsel
Chairperson, Mental Health Commission

ATTACHMENT

CONTRACT NO. MH050109

AMENDMENT NO. x

THIS AMENDMENT is made and entered into this ____ day of _____ 201 __, by and between the COUNTY OF LOS ANGELES (hereafter "County") and University of California, San Diego (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated July 17, 2012, identified as County Agreement No. MH050109, as subsequently amended (hereafter "Agreement"); and

WHEREAS, County and Contractor executed Agreement for Contractor to provide consultant services to the County for the provision of Mental Health Services Act (MHSA) through continued evaluation of integrated care programs formerly funded through the Innovation (INN) component and now funded through the Community Services and Supports Plan; and

WHEREAS, there remains a need for such consultant services through June 30, 2017, to continue to evaluate integrated care programs; and

WHEREAS, County and Contractor intend to amend Agreement only as described hereunder; and

WHEREAS, the Agreement is due to expire on June 30, 2016; and

WHEREAS, County and Contractor intend to extend the term of Agreement for an additional 12 months effective July 1, 2016 through June 30, 2017; and

WHEREAS, the Total Compensation Amount (TCA) for FY 2016-17 will be \$39,000.

NOW THEREFORE, County and Contractor agree that Agreement shall be amended only as follows:

1. Extend the term of the Agreement effective July 1, 2016 through June 30, 2017. The TCA for FY 2016-17 is \$39,000.

2. Paragraph 5.0, COMPENSATION, subparagraph B. shall be revised and the following shall be added:

"B. Total compensation for all services furnished hereunder shall not exceed the sum of THIRTY-NINE THOUSAND DOLLARS (\$39,000) for Fiscal Year 2016-17.

3. Exhibit A, Statement of Work, is deleted in its entirety and replaced with Exhibit A-1, Statement of Work, incorporated herein.

4. Exhibit B-1, Fee Schedule, is deleted in its entirety and replaced with Exhibit B- 2, Fee Schedule, incorporated herein.

5. Except as provided in this Amendment, all other terms and conditions of the Agreement shall remain in full force and effect.

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by County's Director of Mental Health or her designee, and Contractor has caused this Amendment to be subscribed on its behalf by its duly authorized officer, on the day, month, and year first above written.

COUNTY OF LOS ANGELES

By _____
Robin Kay, Ph.D.
Acting Director of Mental Health

CONTRACTOR

By _____

Name _____

Title _____

(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:
OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT
ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By _____
Interim Chief, Contracts Development
and Administration Division

EXHIBIT A-1

COUNTY OF LOS ANGELES — DEPARTMENT OF MENTAL HEALTH PROGRAM SUPPORT BUREAU MENTAL HEALTH SERVICES ACT EVALUATION OF INTEGRATED CARE MODEL PROGRAMS UNIVERSITY OF CALIFORNIA, SAN DIEGO STATEMENT OF WORK

I. OBJECTIVE

Through the Department of Mental Health's (DMH) first Mental Health Services Act (MHSA) Innovation (INN) plan four (4) integrated service models including the Integrated Mobile Health Team, Integrated Clinic Model, Integrated Service Management Model and Integrated Peer-Run Models were implemented to test out different approaches to integrated health, mental health and substance use care. Through a competitive solicitation process, the University of California, San Diego was chosen to recommend to DMH appropriate measures, procure the agreed upon measures, train INN Model Providers on outcome data collection procedures, develop a methodology and establish an approach to data collection, including establishing secured electronic transmission of de-identified client data and develop regular reports to DMH on the status of each model in achieving the identified outcomes as well as a final report on the findings within and across models as it relates to the integration of health, mental health and substance abuse care.

At the conclusion of the INN project, 17 provider partnerships were continued with MHSA Community Services and Supports funding due to attaining particularly strong outcomes. Until DMH is able to modify its web-based outcome application to accept these integrated care outcome metrics, UCSD will continue to provide use of its secured web-based database, including generating outcome reports and providing technical assistance to providers on use of the system.

II. CONTRACTOR'S RESPONSIBILITIES

UNIVERSITY OF CALIFORNIA, SAN DIEGO (UCSD) will be responsible for maintaining the IHOMS outcome database for provider use, providing training and technical assistance to any new staff of the 17 provider organizations using iHOMS, providing aggregated outcome reports at the provider and model level once every 6 months.

III. SERVICES TO BE PROVIDED

UCSD will be responsible to complete the following tasks:

1. Maintain the iHOMS web-based outcome database for use with the 17 provider partnerships associated with FSP-Integrated Mobile Health Team and Integrated Care Program.
2. Providing telephonic or email training and technical assistance on the use of the iHOMS database.
3. Provide provider level and model level aggregated outcome reports every 6 months to DMH. Reports to include analysis and reporting of clients served/enrolled, for

each measure the baseline assessment completion rates and matched pair assessments at 6 month intervals, matched pair statistical analysis,

IV. SERVICE DELIVERY SITE(S)

Evaluation services shall be delivered primarily at the Proposer's site. Training and technical assistance may be provided over the telephone or via email.

V. STAFFING

1. General Staffing Requirements

UCSD shall ensure that staffing adequately addresses the evaluation as described in Section III above and that the following staff and volunteer requirements are met:

- Criminal Clearances: UCSD shall ensure that criminal clearances and background checks have been conducted for all UCSD's staff and volunteers as well as all Subcontractor staff, prior to beginning and continuing work under any resulting Contract. The cost of such criminal clearances and background checks is the responsibility of UCSD whether or not UCSD or any Subcontractor's staff pass or fail the background and criminal clearance investigations.
- Language Ability: UCSD's staff, as well as any Subcontractor staff who are performing services under this Contract, shall be able to read, write, speak, and understand English in order to conduct business with County. In addition to having competency in English, Proposer shall ensure there is a sufficient number of bilingual staff to meet the language needs of the contractors selected to provide services.
- Driving Record: UCSD shall maintain copies of the Department of Motor Vehicles (DMV) printouts for all drivers providing service under this Contract. Reports shall be available to DMH on request. County reserves the option of doing a DMV check on Proposer's drivers once a year.
- Education and Experience: UCSD shall be responsible for securing and maintaining staff who meet the minimum qualifications below and who possess sufficient experience and expertise required to provide services required in this SOW, including the ability to work effectively with multicultural providers. Proposer shall obtain written verification for staff with foreign degrees that the degrees are recognized as meeting established standards and requirements of an accrediting agency authorized by the U.S. Secretary of Education, where applicable.
- Rosters: UCSD shall provide DMH, at the beginning of each Contract term and within 30 days of any staff change(s), a roster of all staff that includes: (1) name and positions; (2) work schedule; and (3) fax and telephone numbers.
- Changes in Staffing: UCSD shall advise DMH in writing of any change(s) in Proposer's key staff at least twenty-four (24) hours before proposed

change(s), including name and qualifications of new staff. Proposer shall ensure that no interruption of services occurs as a result of the change in staff.

2. Evaluation Staffing

- Evaluation activities should be lead by a qualified individual with a doctoral degree. The evaluation staffing may include research assistants or interns with appropriate supervision. All staff must have experience and training charged with producing the deliverables associated with this project. The organizational chart shall indicate the reporting lines of all staff, including subcontractor staff, if applicable. UCSD shall appoint one lead evaluation staff member as the main point of contact for DMH.

VI. ADMINISTRATIVE TASKS

- Record Keeping: UCSD shall document all evaluation services provided for each model and those associated with each deliverable.
- Invoicing: UCSD shall submit invoices monthly outlining the work associated with each deliverable, associated staff salaries and expenditures related to fulfilling deliverables.

Invoices shall be submitted to:

MHSA Implementation and Outcomes Division
Debbie Innes-Gomberg, Ph.D.,
695 S. Vermont Avenue, 8th Floor
Los Angeles, CA 90005

- Computer and Information Technology Requirements: Within 30 days of commencement of contract, UCSD shall acquire a computer system with sufficient hardware and software to meet DMH requirements and an agreement for its on-site maintenance for the entire term of this agreement to comply with the terms of the contract.
- Cooperation: UCSD shall work cooperatively with DMH staff including Information Technology Services staff and any contracted program evaluator, if applicable. Proposer shall provide and train data entry staff to submit the invoice to DMH on a monthly basis.
- Data Collection: UCSD shall submit aggregated outcome data as directed by DMH to evaluate each of the two integrated care models to demonstrate client outcomes in accordance with guidelines established by DMH and the State.

VII. QUALITY MANAGEMENT AND DATA COLLECTION PLANS

1. Quality Assurance and Quality Improvement

- UCSD shall establish and utilize a comprehensive Quality Management Program and Plan including Quality Assurance and Quality Improvement processes to ensure the required services are provided at a consistently high level of service throughout the term of the Contract. The Plan shall be

submitted to DMH for review and approval prior to the Contract start date. The Plan shall be effective on the Contract start date and shall be updated and resubmitted for DMH approval as changes occur.

- The plan shall include an identified monitoring system covering all the services listed in this SOW. The system of monitoring to ensure that contract requirements are being met shall include:
 1. Activities to be monitored, frequency of monitoring, samples of forms to be used in monitoring, title/level and qualifications of personnel performing monitoring functions.
 2. Ensuring that services meet requirements for timeliness, accuracy, completeness, consistency and conformity as defined in the SOW.
 3. Ensuring that professional staff rendering services under the contract has the necessary prerequisites.
 4. Identifying and preventing deficiencies in the quality of service before the level of performance becomes unacceptable including a description of the Quality Improvement strategy and intervention methods.
 5. Taking any corrective action, if needed, including a commitment to provide to the County upon request a record of all inspections, the corrective action taken, the time the problem is first identified, a clear description of the problem, and the time elapsed between identification and completed corrective action.
 6. Continuing to provide services to the County in the event of a strike or other labor action of the Proposer's employees.

2. Data Collection

- UCSD shall establish and implement a data reporting plan as directed by DMH. This will include collecting, managing and submitting the data described in this SOW.
- UCSD shall agree to the following key deliverables schedule, not inclusive of ongoing deliverables:

December, 2016:

- 1. Submit to DMH provider level aggregated outcome reports of all data elements collected in iHOMS.**
- 2. Submit to DMH model level aggregated outcome reports of all data elements collected in iHOMS.**

June, 2017:

- 1. Submit to DMH provider level aggregated outcome reports of all data elements collected in iHOMS.**

2. Submit to DMH model level aggregated outcome reports of all data elements collected in iHOMS.

3. Data Analysis

Matched paired statistical analysis for each measure by provider and model.

INFORMATION TECHNOLOGY

1. Technology Requirements

- Proposer's information system or information technology system shall meet the functional, workflow, and privacy/security requirements referenced in Section 2 (Privacy and Electronic Security) below.
- Proposer shall be solely responsible for complying with all applicable State and federal regulations affecting the maintenance and transmittal of electronic information.

2. Privacy and Electronic Security

- To the extent relevant to deliver the services required by this SOW, Proposer shall comply with all federal and State laws as they apply to protected health information (PHI), individually identifiable health information (IIHI), and electronic information security.
- Any Proposer that is deemed a "Covered Entity under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") shall comply with the HIPAA privacy and security regulations independently of any activities or support of DMH or the County of Los Angeles.

Any Proposer that is deemed a "Business Associate" of County under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") shall enter into a Business Associate Agreement with the County of Los Angeles to ensure compliance with the privacy standards. For example, if the training is to be designed and delivered by a covered entity such as a Community Mental Health Center and the logistical services providers, vendors, or facilities managers are subcontractors, then a Business Associate Agreement would be required between the covered entity and the logistical services or facility providers in case the subcontractors may handle information regarding the health statuses of the students who are consumers or family members. If the training is to be designed and delivered by a non-covered entity, then a Business Associate Agreement will be required between the Contractor and the County in case the Contractor may handle information regarding the health statuses of the students who are consumers or family members.

PERFORMANCE-BASED CRITERIA

The Contract shall include six (6) Performance-based Criteria that shall measure the Proposer's performance related to program and operational measures and are indicative of quality services. These criteria are consistent

with the MHSA. These measures assess the agency's ability to provide the mandated services as well to monitor the quality of services.

Proposer shall provide processes for systematically involving families, key stakeholders, subject matter experts and DMH staff in defining, selecting, and measuring quality indicators at the program and community levels. Shall there be a change in federal, State and/or County policies/regulations, DMH, at its sole discretion, will advise Proposer of the revised Performance-based Criteria with 30-days notice.

The Performance-based Criteria are as follows:

PERFORMANCE BASED CRITERIA	METHOD OF DATA COLLECTION	PERFORMANCE TARGETS
Proposer has the capacity to work effectively with multi-ethnic organizations to provide training and technical assistance on the use of iHOMS.	Provider demonstrates ability to provide training and technical assistance.	Proposer provides training and technical assistance 100% of the time when requested.
Proposer submits semi-annual reports to DMH.	Deliverables to DMH, based on deliverables schedule.	100 % submission at stipulated intervals.

** Note the above performance based criteria table is subject to additional revisions at the discretion of the County.

EXHIBIT B-2

COUNTY OF LOS ANGELES — DEPARTMENT OF MENTAL HEALTH Mental Health Services Act Evaluation of the Integrated Care Programs

UNIVERSITY OF CALIFORNIA, SAN DIEGO

FEE SCHEDULE Fiscal Year 2016-17

I. DISBURSEMENT SCHEDULE

For the services described in Section III ("Services To Be Provided") on Exhibit A, DMH shall pay the University of California, San Diego (UCSD) the total of \$39,000 for services rendered from July 1, 2016 through June 30, 2017.

Payment to UCSD for the following funds shall be based on monthly invoices from UCSD to DMH as described below. No payment shall be made without prior approval of a designated DMH representative. The DMH representative shall review the invoice and project report to determine whether UCSD is in substantial compliance with the terms and conditions of this Exhibit B-2. The County of Los Angeles MHSA Implementation and Outcomes Division District Chief will work with UCSD to determine appropriate format for outcomes reporting.

II. DELIVERABLES PAYMENT SCHEDULE FOR EVALUATION OF INNOVATION SERVICE MODELS

Maintain iHOMS web-based database for direct provider entry of outcome measures.	
Provide basic training and technical assistance for 17 providers and DMH staff on iHOMS use and reports production.	
Complete semi-annual outcome reports for the 14 Integrated Care programs and 3 Integrated Mobile Health Team providers.	
Fiscal Year 2016-17 Total:	\$39,000

III. SUBMISSION AND CERTIFICATION OF INVOICES

UCSD shall submit to DMH monthly invoices, billable services are not to extend beyond allocated Fiscal Year. Each monthly invoice shall be submitted within thirty (30) days of the last date the invoiced services were provided. The UCSD Program Administrator shall certify that invoices are for services and costs eligible under the terms and conditions for reimbursement.

UCSD shall submit invoices to:

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU
MHSA IMPLEMENTATION AND OUTCOMES DIVISION
695 SOUTH VERMONT AVENUE, 8TH FLOOR, SUITE 800
LOS ANGELES, CALIFORNIA 90005
ATTN: DEBBIE INNES-GOMBERG, PH.D.**

IV. PAYMENT PROCEDURES

Upon receipt of invoices from UCSD, DMH shall make payment to UCSD within forty-five (45) days of the date the invoice was approved for payment. If any portion of the invoice is disputed by DMH, DMH shall reimburse UCSD for the undisputed services contained on the invoice and work diligently with UCSD to resolve the disputed portion of the claim in a timely manner.

DMH shall make reimbursement payable to UCSD. DMH shall send payments to:

**UNIVERSITY OF CALIFORNIA, SAN DIEGO
TODD GILMER, PH.D.
9500 GILMAN DRIVE
LA JOLLA, CA 92093-0622**

V. MENTAL HEALTH SERVICES ACT FUNDS

In the event MHSA funds are not available to pay MHSA claims or if the State denies any or all of the MHSA claims submitted by County on behalf of Contractor, County is not responsible for any substantive payment obligation.

County shall evaluate Contractor utilization of MHSA funding allocated under this Agreement and shall adjust and reallocate amounts to any one or a combination of the following: 1) another Legal Entity contractor, 2) DMH directly operated clinics, and/or 3) the County DMH reserve of unallocated funding for MHSA services. Amounts to be reduced and reallocated will be based on County's projected underutilization of such MHSA funds.